

**REQUEST FOR PERSONNEL SECURITY SERVICES**  
**U.S. DEPARTMENT OF AGRICULTURE**

Instructions: Complete ALL of the information below and attached it to the appropriate paperwork.

**The following action is requested on the individual named below:**

- ☐ INITIAL INVESTIGATION  
☐ REINVESTIGATION  
☐ UPGRADE SECURITY CLEARANCE  
☐ TRANSFER INVESTIGATION CONDUCTED BY ALTERNATE AGENCY FOR NEW USDA EMPLOYEE (RECIPROCAL ACCEPTANCE OF ACCESS ELIGIBILITY DETERMINATION)

**EMPLOYEE INFORMATION**

1. NAME:	2. <input type="checkbox"/> EMPLOYEE <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> VOLUNTEER
3. POSITION TITLE:	4. DOB/POB:

**JOB INFORMATION**

5. USDA AGENCY:	6. DUTY LOCATION:
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**SECURITY INFORMATION**

7. NATIONAL SECURITY POSITION (SF-86): ☐ YES ☐ NO, GO TO QUESTION #8

POSITION SENSITIVITY LEVEL: ☐ SPECIAL-SENS ☐ CRITICAL-SENS ☐ NON-CRITICAL SENS

TYPE OF CLEARANCE: ☐ TS/SCI ☐ TOP SECRET ☐ SECRET ☐ CONFIDENTIAL ☐ NONE REQUIRED

**IF YOU ARE REQUESTING A SECURITY CLEARANCE, THE ‘JUSTIFICATION FOR REQUESTED SECURITY CLEARANCE’ FORM MUST BE ATTACHED.**

8. PUBLIC TRUST POSITION (SF-85P): ☐ YES ☐ NO

POSITION SENSITIVITY LEVEL: ☐ HIGH RISK ☐ MODERATE RISK

**9. TYPE OF INVESTIGATION**

TYPE OF INVESTIGATION (PICK ONE)	Priority (A)	Standard (C)
<input type="checkbox"/> SSBI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> BI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> LBI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> MBI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ANACI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> NACLC	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SGI (SBI upgrade)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SAC	<input type="checkbox"/>	
<input type="checkbox"/> SSBI-PR	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> BGI (BI upgrade)	<input type="checkbox"/>	<input type="checkbox"/>

**10. REQUIRED ACCOUNTING INFORMATION**

OPAC-ALC:  
MISCELLANEOUS OBLIGATION NUMBER:

AGENCY DATA:

11. REMARKS/NOTES:

12. REQUESTED BY:

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AUTHORIZING SIGNATURE

13. DATE

14. POINT OF CONTACT:

NAME:  
PHONE: